FORM **G-80** (REV. 2004)

STATE OF HAWAII — DEPARTMENT OF TAXATION General Excise/Use, Withholding, Transient Accommodations, Rental Motor Vehicle and Tour Vehicle Tax Refund

TRACER REQUEST FOR TAX YEAR _____

(See back for Instructions)

Check Tax Type for this tracer request:	·		
General Excise/Use Withholding	Transient Accommodations	Rental Motor V	ehicle and Tour Vehicle
Part I General Information (Complete Lines 1 to 1). Taxpayer's Name	2. Hawaii Tax I.D. Number for the tax account indicated above		
3. Mailing Address on the Return	4. New Mailing Address (if different)		
Daytime Telephone Number: Residence ()	Busine	ess ()	
Part II Reason For Tracer Request			
 Did you receive the refund check? Yes If "No", stop here, otherwise continue to line 2. The refund check was received but was (check ONE or Lost Stolen Destroyed AND 	No f the following boxes): Other		
	rtner or Member, Executor, T Order of ck upon receipt of this form. If you re	eceive/find your origina	
Part III Declaration			
I hereby declare, under the penalties provided by sections 231-34, 23 knowledge and belief, it is true, correct, and complete. Print or Type Your Name Signature		e (if applicable)	nd, to the best of my Date
For C	Office Use Only		
	Check/\	Varrant#	
	COMP	VO#	
	Tax I.D	#	
	Tax Off	ce VO#	
	Post Da	te	

GENERAL INSTRUCTIONS

- 1. Enter the tax year for which the refund was due at the top of the form **and** check the appropriate box to indicate the type of tax the tracer request is for. If you are requesting a tracer for more than one refund check, you must complete a separate Form G-80 for each request.
- 2. Complete Parts I through III of the Tracer Request Form. In the case of a corporation, partnership or trust, an officer, a partner or member, executor, trustee or duly authorized agent must sign this request. Be sure to complete Part III, Declaration, print or type your name, include title (if applicable) and date in the spaces provided. You must include your signature. Your request will not be processed if any requested information is missing.
- 3. Send the completed Tracer Request Form to:

Hawaii Department of Taxation Attention: Taxpayer Services Branch P.O. Box 259 Honolulu, HI 96809-0259

- 4. A "STOP PAYMENT" will be issued on the original check after you send in this form. If you receive or find your original check after submitting this form, **DO NOT CASH THE ORIGINAL CHECK**. You must return the check to the Department of Taxation.
- 5. You should receive information about your refund in 4 6 weeks.
- 6. If you have any questions, please call the Department of Taxation at (808) 587-4242 or toll-free at 1-800-222-3229. For hearing impaired access, please call (808) 587-1418 or toll-free at 1-800-887-8974.